



Application for Appointment to the 2002 K-8 Reading/Language Arts/English Language Development Review Panels

Applications must be received, postmarked, or dated (if sent by delivery service) no later than Wednesday, November 1, 2000

A completed application includes:

- Application **Part I** (Background); **Part II** (Acknowledgments); **Part III** (Questions); **Part IV** (References and Letter(s) of Recommendation); **Part V** (Conflict of Interest)
- Original **signatures** as required (pages 5 and 9).
- A copy of the applicant's curriculum vitae (or résumé).
- Letter(s) of recommendation (optional item) -- one letter is adequate, please do not include more than three.

Return application with attachments as indicated to:

California Department of Education
Curriculum Frameworks and Instructional Resources Division
721 Capitol Mall, Third Floor
Attention: Dr. Deborah Keys
Sacramento, California 95814
(916) 654-1281 (Phone)
(916) 657-5437 (Fax)
e-mail: Dkeys@cde.ca.gov

Questions? Call The CFIR Office at the above number.

What is this all about?

The Curriculum Development and Supplemental Materials Commission (Curriculum Commission) serves as an advisory body to the California State Board of Education (State Board). The State Board plans to appoint two panels of reviewers to review Reading/Language Arts/English Language Development (ELA/ELD) instructional materials and to recommend to the Curriculum Commission high quality ELA/ELD instructional materials for use in grades K-8 as part of the 2002 K-8 Reading/Language Arts/English Language Development Adoption (Attachment A).

This application is for appointment to either the **Content Review Panel (CRP)** or the **Instructional Materials Advisory Panel (IMAP)** for the 2002 K-8 Reading/Language Arts/English Language Development Adoption. The distinction between the two review panels is:

CRP (Content Review Panel) is appointed by the State Board of Education to advise the Curriculum Development and Supplemental Materials Commission. This panel is composed of recognized subject matter experts who evaluate materials according to the State Board of Education-adopted *1999 English-Language Arts Content Standards*, the *Reading Language Arts Framework for California Public Schools* and the adoption criteria. The CRP will ensure that the materials align with the content standards, the framework, and the evaluation criteria adopted by the State Board of Education. In addition, CRP members will make sure programs are accurate and based on current and confirmed research. CRP members review only those materials or part of it that pertains to the CRP's area of expertise. The CRP is a resource for the IMAP. The CRP review materials based on "Category One of the Criteria: Alignment to Content Standards" and the 1999 *Reading/Language Arts Framework for California public schools*.

IMAP (Instructional Materials Advisory Panel) is recommended to the State Board of Education by the Curriculum Development and Supplemental Materials Commission and is advisory to that body. This panel consists of classroom teachers, administrators, curriculum specialists, college faculty, parents, and other interested parties (required by Title 5 Regulations). The IMAP evaluates materials according to all five categories of the Criteria: "(1) Alignment to Content Standards and the 1999 *Reading/Language Arts Framework* for California public schools; (2) Program Organization; (3) Assessment; (4) Universal Access; (5) Instructional Planning and Support".

(Please check one) I would prefer to be considered for:



CRP



IMAP



Either CRP or IMAP .

Original signatures are needed. If this application is faxed, please send the original document.

Part I. Background Information

Last Name	First Name	Middle Name or Initial	
Home Address			
City	County	State	Zip Code
Home Phone Number ()	Business Phone Number ()		
Fax Number ()	E-mail Address		

BUSINESS ADDRESS (IF APPLICABLE)

Employer's Name and Address (e.g., University, or Company)	Applicant's Work Site Address, if different (e.g., , branch, or office)
Employment Position or Status	
(Current Assignment) Grade Level, if applicable	

EMPLOYER REPRESENTATIVE (IF APPLICABLE)

Name and Address of Dean or Department Chair (or comparable level employer representative)	Phone Number ()
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PREVIOUS EXPERIENCE.

Have you served on an IMAP or CRP before? _____ If so, when? _____
Have you had recent experience(s) with a formal process involving instructional materials review?

CURRENT RESPONSIBILITIES. Briefly describe your current employment (or comparable) responsibilities. If you are a classroom teacher, please include the classes you are currently teaching and the grade level(s).

EDUCATIONAL BACKGROUND. Please summarize your post-secondary educational background, including the dates of any degrees, credentials, or specialized certificates and the names of the institutions of higher education where they were earned.

KNOWLEDGE OF the 1997 *English-Language Arts Content Standards* and the 1999 *Reading/Language Arts Framework for California Public Schools*. What specific background or experience have you had with the State Board of Education adopted framework and the State Board adopted 1997 *English-Language Arts Content Standards*?

GRADE-LEVEL EXPERTISE. Please indicate any grade level(s) in which you have particular expertise, knowledge, or experience.

Primary
grades (K-3)

Intermediate grades (4-
6)

Middle grades (7-8)

Other

Other grade level expertise

SPECIALIZED TRAINING IN READING/LANGUAGE ARTS AND ENGLISH LANGUAGE DEVELOPMENT. Please indicate any recent specialized training you have had in Reading/Language Arts and/or English Language Development (California Reading Academy, the Comprehensive Reading Leadership Training, AB 1086 training, training in Linguistics, etc.) Also list any membership in professional organizations or associations related to Reading/Language Arts and/or English Language Development. (attach additional sheets)

OTHER QUALIFICATIONS. Please summarize any other qualifications or information that may be pertinent to your appointment to an IMAP or CRP and was not covered above. For example, do you have experience/expertise as a teacher or experience/expertise in special education, social science, science, assessment, advanced learners, or as a school administrator, writer, editor,? Do you have an expertise in a second/third language? (attach additional sheets)

Are you the parent, guardian, or grandparent of children now attending the public schools in California?

PREFERRED DELIVERY ADDRESS. If you are appointed to a review panel, please indicate the address to which you would want materials delivered for review. As this could be a considerable volume of material, you may wish to make arrangements to have the materials delivered some place other than your home.

Preferred Delivery Address

City

State

Zip Code

Phone Number
()

Part II. Acknowledgments

Participation on a CRP or IMAP is a tremendous professional opportunity and responsibility. It represents a significant commitment of time and personal energy. However, only appointees' necessary travel expenses and per diem (i.e., lodging, meals, and incidental expenses) are reimbursable. Individual stipends and employer reimbursements for substitute personnel are NOT provided. In acknowledgment of the commitment and the financial limitations, the following signatures are required.

Applicant's Acknowledgment	
<p>I understand that this application becomes public information when submitted. I also understand that serving on a CRP or IMAP is demanding in terms of time and personal energy for a period of about two months (please see Attachment A for the specific dates). I expressly recognize that, if appointed, I must:</p> <ul style="list-style-type: none"> • participate in training (location to be determined) on responsibilities and procedures and listen to presentations by publishers submitting instructional materials for adoption consideration (CRP-3 days, July 29 – August 1, 2001; IMAP-5 days, July 29 –August 3, 2001). • expect to spend a substantial amount of time conducting my independent review of the materials submitted for consideration as assigned to me; and • participate in the IMAP deliberation week October 14-19, 2001 (CRP - 2 days; IMAP - 5 days). 	
Printed Name of Applicant	
Signature of Applicant	Date

Supervisor's/Employer's Acknowledgment (Optional for college or university level)			
<ul style="list-style-type: none"> • We understand that the evaluation of instructional materials is personally and professionally demanding. • We have read the information provided above concerning the Reading/Language Arts IMAP and CRP processes. To the extent we have had any questions, they have been answered. • We believe this applicant is knowledgeable, creative, flexible, responsible, and capable of contributing meaningfully and constructively in this evaluation process. • We believe this applicant works well with others. • We <i>recommend this applicant</i> for appointment to an IMAP or CRP (if applicable). • If this applicant is appointed to a review panel, our organization will provide release time and other support as mutually agreed to by the organization and the applicant in order to facilitate the applicant's participation. 			
Printed Name of Immediate Supervisor, e.g., School Principal		Printed Name of Authorized Employer Representative, e.g., District Superintendent	
Signature of Immediate Supervisor	Date	Signature of Authorized Employer Representative	Date

Part III. Short Written Response Questions

Please address the following questions thoughtfully and concisely. You are encouraged to keep your response to each question to **no more than half a typed page** in length. Include the question(s) and your name on each response page. Keep in mind that if you do not have direct experience as a Reading/Language Arts/English Language Development teacher or educator, address the questions based on your personal or professional interest in Reading/Language Arts/English Language Development

Note that all applicants should answer questions 1 and 2; in addition, IMAP Applicants should answer questions 3 & 4, and CRP Applicants should answer question 5.

1. **(For both CRP and IMAP)** How does your academic, professional, and/or personal background qualify you to serve on the Reading/Language Arts/English Language Development IMAP or CRP? In what ways would you contribute to the process? (Please include a brief description of your current position and also any post secondary education background or special training in Reading/Language Arts and/or English Language Development).

2. **(For both CRP and IMAP)** Describe any connections with community service/involvement you have and how this may contribute to your ability to participate in the review process. Briefly describe the community in which you live and work.

3. **(For IMAP only)** Describe a Reading Language Arts or an English Language Development lesson you might use or have used in a classroom and how you would assess it. Explain how the lesson or activity might help a teacher deliver the information, using the State Board adopted 1999 *Reading/Language Arts Framework* as the instructional context for assisting all students to reach the state adopted *English-Language Arts Content Standards*.

4. **(For IMAP only)** Give detail of any experiences you have had teaching English learners, students who read below grade level, advanced learners, and/or special education?

5. **(For CRP only)** How would you describe your interest in, or understanding of, recent developments in Reading/Language Arts and English Language Development education, including your knowledge of the State Board adopted 1997 *English-Language Arts Content Standards*?

Part IV. Professional References and Letter(s) of Recommendation

Professional References (*Not necessary to complete if information is included in curriculum vita*). Please list three professional references. These should be people unrelated to you who are familiar with your work, background, and talents.

1. Reference's Name		Phone Number ()
Address		
City	State	Zip Code

2. Reference's Name		Phone Number ()
Address		
City	State	Zip Code

3. Reference's Name		Phone Number ()
Address		
City	State	Zip Code

Letter(s) of Recommendation (Optional). You may enclose one, but no more than three, letters of recommendation (which may come from one of the professional references listed above).

Part V. Conflict of Interest

Please read the *“Statement of Activities that are Inconsistent, Incompatible, or in Conflict with Duties of a Member of an Educational Policy Advisory Commission or a Committee or Panel Thereof,”* as amended (see Attachment B). Your candid and complete answers to the following questions will assist the General Counsel of the California Department of Education and the General Counsel of the State Board of Education to determine your eligibility for appointment if any questions arise.

1. Are you currently employed by or under contract to any person, firm, or organization that has submitted or is likely to submit instructional materials for adoption in the State of California?

- ☐ YES
- ☐ NO
- ☐ UNCERTAIN

If YES or UNCERTAIN, please explain and provide as much detail as possible:

2. Have you ever been employed by or had any other kind of contractual relationship with any person, firm, or organization that has submitted or is likely to submit instructional materials for adoption in the State of California?

- ☐ YES
- ☐ NO
- ☐ UNCERTAIN

If YES or UNCERTAIN, please explain and provide as much detail as possible:

3. Do you expect to receive any royalty payments from any publishers, previous publications, or standby consulting during your period of service on an Instructional Materials Advisory Panel (IMAP) or Content Review Panel (CRP)?

- ☐ YES
- ☐ NO
- ☐ UNCERTAIN

If YES or UNCERTAIN, please explain and provide as much detail as possible:

4. Were you an author, contributor, or editor of (or consultant on) any textbook, other curriculum material, or project proposal that is likely to be submitted to a Reading/Language Arts/English Language Development Instructional Materials Advisory Panel?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNCERTAIN
If YES or UNCERTAIN, please explain and provide as much detail as possible:	

5. Have you received compensation, or do you expect to receive compensation, or do you have any other kind of contractual relationship with any organization that is either a subsidiary, parent organization, or "sister organization" of any entity that has submitted or will submit instructional materials for adoption in the State of California?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNCERTAIN
If YES or UNCERTAIN, please explain and provide as much detail as possible: (use separate sheet)	

CERTIFICATION	
The answers to the foregoing questions on conflict of interest are true and correct to the best of my knowledge and belief.	
Printed Name of Applicant	
Signature of Applicant	Date

OPTIONAL INFORMATION

State Board Appointments: Representation - (Title 5 Regulations, Article 2.1, Section 9516)

The primary criteria for membership shall be subject matter expertise and professional knowledge of, and successful experience with, effective educational programs and practices for the full range of the state's diverse population. The Board shall, to the extent possible, appoint persons who are representative of the various ethnic groups and types of school districts in the state. Nothing in this section shall preclude public members, i.e., noneducators, from serving on a task force or committee as the Board may deem appropriate. In accordance with the State Board regulation, applicants may voluntarily choose to acknowledge the categories listed below:

Gender:

- ☐ Male
☐ Female

Ethnicity: _____

Geographic Location:

 City County

Type of School District: (i.e. urban, suburban, rural, etc.):
